

REGISTRATION FORM

Turning Ideas into Action Forum Building Momentum Session

Although there is no registration fee for either event,
we request that you register as space is limited.
Please return this registration form by Friday, November 17, 2006

Name/Title: _____

Organization: _____

Address: _____

Telephone: _____ Email: _____

I will attend:	Turning Ideas into Action Forum	Yes ()	No ()
	Lunch, Wednesday, November 29	Yes ()	No ()
	Delegate Reception	Yes ()	No ()
	Building Momentum Session	Yes ()	No ()
	Thursday, November 30		

() If you have any special dietary needs or require reasonable accommodation in order to fully participate, please check here and we will contact you.

Please indicate first and second preferences for each break-out session below:

Strategy Identification Session #1:

Disease Management _____

Transitional Care _____

Cultural Diversity _____

Career Transitions &
Workplace Re-entry _____

Strategy Identification Session #2:

Rural Healthcare Access _____

Housing _____

Workforce Capacity _____

Access to Employment
Opportunities _____

Strategy Identification Session #3:

Health Promotion _____

Intergenerational
Activities _____

Mobility _____

Direct Care Workers _____

Please fax or mail this registration form to: California Commission on Aging
1300 National Drive, Suite 173
Sacramento, CA 95834
Fax: (916) 419-7596 Phone: (916) 419-7591
Email: ccoa@cco.ca.gov